UNITED STATES BANKRUPTCY COURT DISTRICT OF RHODE ISLAND								Voluntary Petition		
Name o	f Debtor (if ir	ndividual, en	ter Last, Fir	st, Middle):			Name	of Joint Debtor (S	pouse) (Last, First, Middle):	
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):							All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):			
Soc. Sec./Tax I.D. No. (if more than one, state all):							Soc. Sec./Tax I.D. No. (if more than one, state all):			
Street Address of Debtor (No. & Street, City, State, & Zip Code):							Street Address of Joint Debtor (No. & Street, City, State, & Zip Code):			
County of Residence or of the Principal Place of Business:							County of Residence or of the Principal Place of Business:			
Mailing Address of Debtor (if different from street address):							Mailing Address of Joint Debtor (if different from street address):			
Location of Principal Assets of Business Debtor (if different from street address above):										
			Informat	ion Rega	rding the D	Debto	r (Ch	eck the Appli	icable Boxes)	
<ul> <li>Venue (Check any applicable box)</li> <li>Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</li> <li>There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</li> <li>This petition is being filed by a corporation or partnership under chapter 11 and the debtor acknowledges that a Venue Disclosure Form is required to</li> </ul>										
be filed by General Order 97-02.  Type of Debtor (Check all boxes that apply)							Chapter or Section of Bankruptcy Code Under Which			
☐ Individual(s) ☐ Railroad							the Petition is Filed (Check one box)			
☐ Pa	orporation artnership ther			Stockbrok Commodi				Chapter 9	☐ Chapter 11 ☐ Chapter 13 ☐ Chapter 12 Incillary to foreign proceeding	
Nature of Debts (Check one box)							Filing Fee (Check one box)			
□ Consumer/Non-Business □ Business							☐ Full Filing Fee attached			
Chapter 11 Small Business (Check all boxes that apply)							Filing Fee to be paid in installments (Applicable to individuals only)  Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments.  Rule 1006(b). See Official Form No. 3.			
	<ul> <li>Debtor is a small business as defined in 11 U.S.C. § 101</li> <li>Debtor is and elects to be considered a small business under</li> </ul>									
	1 U.S.C. § 1	( ) (	,	stimates on	lv)					
			•		•	ecured c	reditors	<b>S</b> .		
<ul> <li>Debtor estimates that funds will be available for distribution to unsecured creditors.</li> <li>Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</li> </ul>										
Estimated Number of Creditors										
1-15 <b>□</b>	16-49	50-9		l-199 ⊒	200-999	1000-	over		THIS SPACE FOR	
\$0 - 50,000	\$50,001- \$100,000	\$100,001- \$500,000	\$500,001- \$1 million	\$1,000,001- \$10 million	\$10,000,001- \$50 million		00,001- million	More than \$100 million	COURT USE ONLY	
Estimated Debts										
\$0 - 50,000	\$50,001- \$100,000	\$100,001- \$500,000	\$500,001- \$1 million	\$1,000,001- \$10 million	\$10,000,001- \$50 million	\$100	00,001- million	More than \$100 million		

(Official Form 1) (9/01)

Voluntary Petition

Name of Debtor(s):

Voluntary Petition	Name of Debtor(s):				
(This page must be completed and filed in every case)					
Prior Bankruptcy Case Filed Within Last 6 Ye	ears (If more than one, attach additio	nal sheet)			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner of	or Affiliate of this Debtor (If mor	e than one, attach additional sheet)			
Name of Debtor:	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Signati	ıres				
Signature(s) of Debtor(s) (Individual/Joint)	Exhibi				
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed	(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)  ☐ Exhibit A is attached and made a part of this petition.				
under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed	Exhibit A is attached and made a part of this petition.				
under chapter 7.  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts)				
X Signature of Debtor	I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.				
XSignature of Joint Debtor	X Signature of Attorney for Do				
Telephone Number (If not represented by attorney)	Exhibit (				
Date	Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to				
Signature of Attorney	public health or safety?				
Signature of Attorney for Debtor(s)	☐ Yes, and Exhibit C is attac ☐ No	ched and made a part of this petition.			
Printed Name of Attorney for Debtor(s)	•	orney Petition Preparer tition preparer as defined in 11 U.S.C.			
Firm Name	§ 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.				
Address	Printed Name of Bankruptcy Pet	ition Preparer			
	Social Security Number				
Telephone Number	Address				
Date	Audicss				
Signature of Debtor (Corporation/Partnership)  I declare under penalty of perjury that the information provided in this	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:				
petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.					
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X	If more than one person prepare additional sheets conforming to each person.	ed this document, attach the appropriate official form for			
X Signature of Authorized Individual	X				
Printed Name of Authorized Individual	Signature of Bankruptcy Petiti	on Preparer			
Title of Authorized Individual	Date  A bankruptcy petition preparer's	failure to comply with the provisions			
Date	of title 11 and the Federal Rules of title 11 and the Federal Rules of imprisonment or both	of Bankruptcy Procedure may result			